| PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 Application or Docket Number O O 80 6 2 7 | | | | | | | | | | | | | |
|--|--|---|--------------|----------------------|---------------------------------|------------------|-----|---------------------|------------------------|----|---------------------|------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | | YTTTY | OR | OTHER SMALL | | |
| TOTAL CLAIMS | | | 8 | | | | R | ATE | FEE | | RATE | FEE | |
| FOR UZ 25 02 | | | NUMBER FILED | | NUMBER EXTRA | | BAS | BASIC FEE 370.00 | | OR | Basic Fee | 740.00 | |
| TOTAL CHARGEABLE CLAIMS | | | 8 minus 20= | | . Ф | | × | 9= | | OR | X\$18= | | |
| INDEPENDENT CLAIMS | | | minus 3 = | | • | | × | X42= | | OR | X84= | 84 | |
| MU | LTIPLE DEPEN | DENT CLAIM PF | RESENT | | | | +1 | 40= | | OR | +280= | | |
| * If the difference in column 1 is less than zero, enter *0* in column 2 | | | | | | | | TOTAL | | OR | TOTAL | 824 | |
| CLAIMS AS AMENDED - PART II (Solumn 1) (Column 2) (Column 3) | | | | | | | SA | SMALL ENTITY | | | OTHER THAN | | |
| AMENDMENTA | 803 9 | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVI | HEST ABER OUSLY FOR | PRESENT EXTRA | | ATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | . 9 | Minus | - 7 | 20 | | × | 9= | | OR | X\$18= | | |
| | Independent | . 5 | Minus | *** | 4 | = | × | 42= | | OR | X | 200 | |
| ٢ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | 40=. | | OR | +280= | | |
| 03(06/06 (Column 1) (Column 2) (Column 3) | | | | | | | | TOTAL ADDIT, FEE | | 00 | TOTAL ADDIT, FEE | pd. | |
| | | | | | | | | 1. FEE | | | ADDII. 1 CC | ,υ | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | PREV | REST ABER ROUSLY FOR | PRESENT EXTRA | R | ATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | . 16 | Minus | ** | 20 | • 😙 | × | 9= | | OR | X\$18= | | |
| | Independent • U | | Minus ••• | | G = -0 | | × | 42= | | OR | ¹X84≃ | • | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | 40 - | | OR | +280= | | |
| | | | | | | | | TOTAL T. FEE | • | OR | TOTAL ADDIT, FEE | -0 | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | NUX PREV | HEST MBER MOUSLY O FOR | PRESENT EXTRA | R | ATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | • | Minus | 44 | | c | × | 9= | | OR | X\$18= | | |
| | Independent | • | Minus | *** | | - | × | 42= | | OR | X84=. | | |
| L | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | 40= | | OR | +280= | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL ADDIT. FEE | | | | | | | | | | OR | TOTAL | | |
| - | The "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "3." ADDIT. FEE ADDIT. FEE The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |